TRA	NSMITTAL OF INF (Under	Docket No. 80867/001						
n Re Ap	n Re Application:							
Kristian L	illerud							
	Serial No	Filing Date	Examiner	Group Art Unit				
10/	5@7672	Herewith	TBA	TBA				
Title: Method a	and Device for Recordin	g and Determining the Weight o	of Fish		<u></u>			
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	(Only	complete if Applicant elects to pa	ay the fee set forth in 37 CF	R 1.17(p))				
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	Dahad O Hal	Signature	addressed to Mail Stop,	Commissioner for Patents, P.O.				
		diman, 45,437 enberger, LLC	Box 1450, Alexandria, V	A 22131-1450				
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	St. Louis, MO 314-480-1500		Express Mail No.: & V	017675905W				
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Date	: Feb 9, 2	006	Zad	South				
			Signature of Perso	on Mailing Correspondence				
			Karen	K. Sonsteby				
Cust	omer No: 029493		Typed or Printed Nam	e of Person Mailing Certificate				

## IAP20 Res'd PCT/FTO 09 FEB 2000

TRANSMITTAL OF INFORMATION DISCLOSURE STATEMENT (Under 37 CFR 1.97(b) or 1.97(c)			Docket No. 80867/001		
In Re /	Application Of:			<u> </u>	
Kristia	n Lillerud et al.				
	Serial No.	Group Art Unit			
10	0/587672	Hereiwth	TBA	TBA	
Title:					
Metho	d and Device for Recordin	ng and Determining the Weight	of Fish		
		MAIL : Commissione	ox 1450		
		37 CFR	1.97(b)		
1. 🛚	filing of a national appl within three months of international application	osure Statement submitted he plication other than a continued of the date of entry of the nation; before the mailing of a first (after the filing of a request for call	d prosecution application in ional stage as set forth in Office Action on the merits	under 37 CFR 1.53(d); in 37 CFR 1.491 in an ts, or before the mailing	
		37 CFR	. 1.97(c)		
2. 🗌	CFR 1.97(b), provided Final Action under 37	sure Statement submitted here that the Information Disclosure CFR 1.113, a Notice of Allogoution in the application, and is	re Statement is filed before wance under 37 CFR 1.3	re the mailing date of a .311, or an Action that	
	the statement s	pecified in 37 CFR 1.97(e);			
		OR			
	the fee set forth	in 37 CFR 1.17(p).			
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## IAP20 Roc'd PCT/FTO 09 FEB 2006

PTO/SB/08A,B (08-03)

Approved for use through 07/31/2006. OMB 0651-0031

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Complete if Known Substitute for form 1449/PTO **Application Number** Filing Date First Named Inventor Kristian Lillerud INFORMATION DISCLOSURE **Art Unit TBA** STATEMENT BY APPLICANT (Use as many sheets as necessary) **Examiner Name TBA** 2 **Attorney Docket Number** Sheet 1 of 80867-001

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Examiner Initials *	Cite No. <sup>1</sup>	<u>Document Number</u> Number-Kind Code <sup>2 (if known)</sup>	Put	olication Date -DD-YYYY	Nar	me of Patentee or olicant of Cited Document	•	Pages, Columns, Lines Where Relevant Passages or Relevant Figures Appear	
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## NON PATENT LITERATURE DOCUMENTS

Examiner Initials*	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.) date, page(s), volume-issue number(s), publisher, city and/or country where published.	T²
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Examiner	Date	
Signature	Considered	

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